

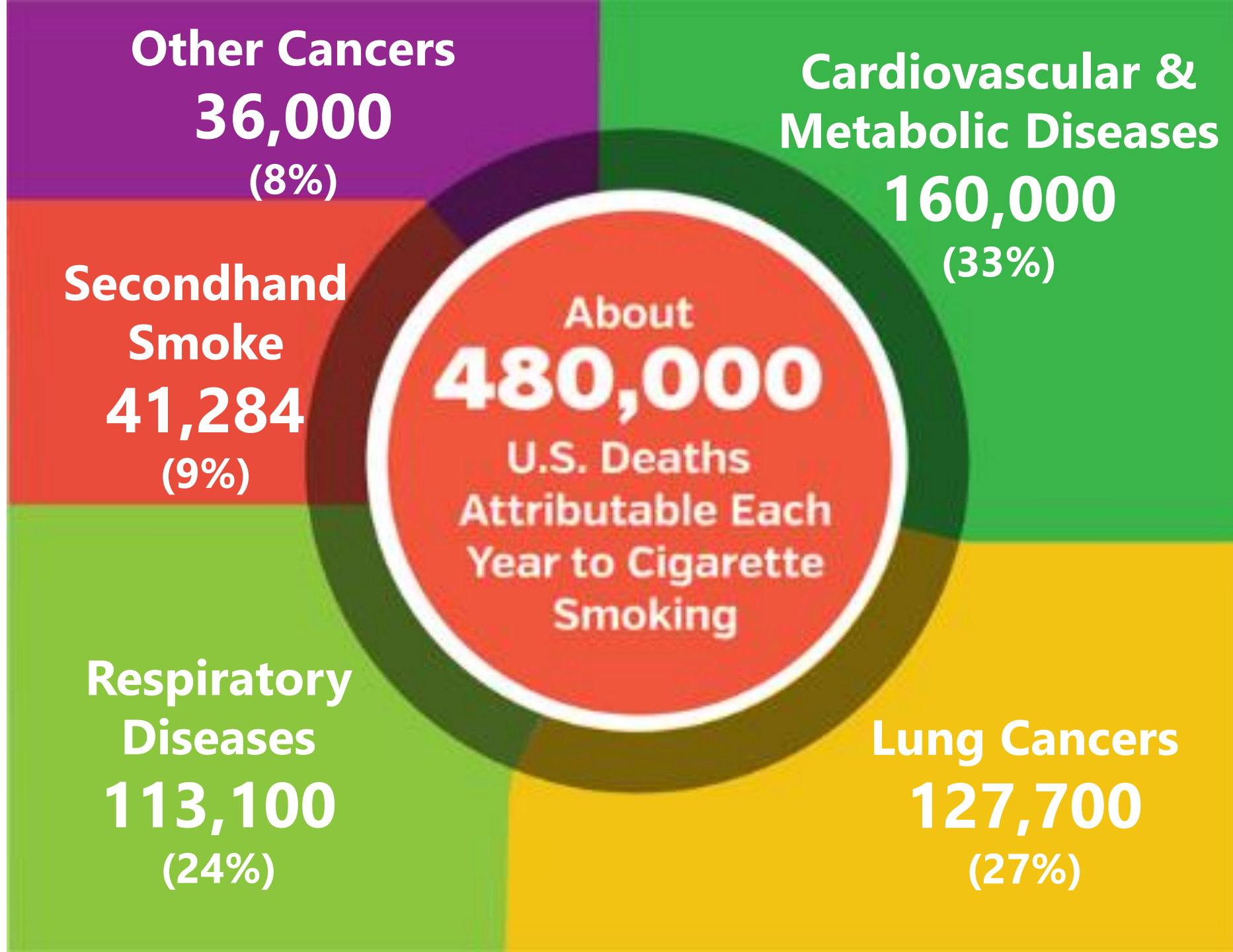


Tobacco Cessation & SD QuitLine Healthcare Systems

Presented By:
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**Statewide Tobacco
Cessation Coordinator**

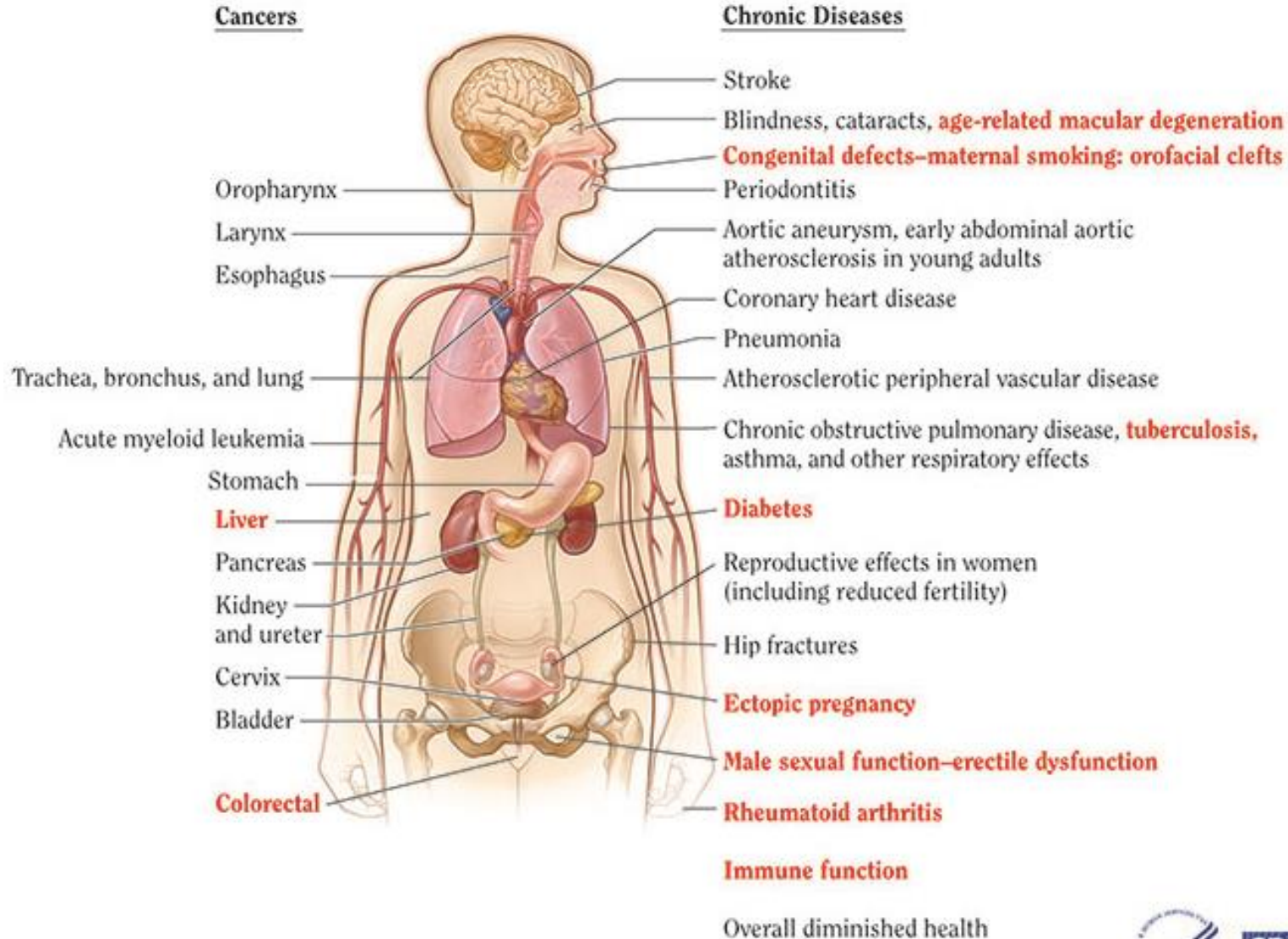
Topics

- **Toll of tobacco**
- **Priority Populations**
- **Importance of tobacco cessation in your practice**
- **Health Systems Change**
- **Ask, Advise, Refer- 2A's & R**
- **SD QuitLine**



Risks from Smoking

Smoking can damage every part of your body



Cost of Tobacco Use

South Dakota

- **\$373 million** in tobacco related health care costs per year
- **\$282.5 million** in lost work productivity
- **\$782 per household** in taxes



South Dakota

Adult Smoking Rates:

U.S. 17.1 %

SD 18.1 %



Priority Populations

- Youth & Young Adults
- American Indian
- Pregnant Women
- Spit Tobacco Users
- Mental Health & Substance Abuse Populations
- Medicaid Clients



Tobacco use is a chronic condition, and like other chronic conditions, every tobacco user should be offered treatment.

What will be doesn't have to be.

The ability to assist with tobacco cessation is the responsibility of every health care professional who sees tobacco using patients.



1.866.SD-QUITS www.SDQuitLine.com

What is a Health System?



Why Health Systems?

Patient Benefits

- Improves health and quality of life
- Greatly reduces risk of disease and premature death

Provider Benefits

- Increases patient satisfaction with providers
- Improves health outcome
- Improves quit rates

Practice Benefits

- Increases revenue
- Increases accountability
- Meets local, state, and healthcare delivery and payment reform
- Improves performance in routine care

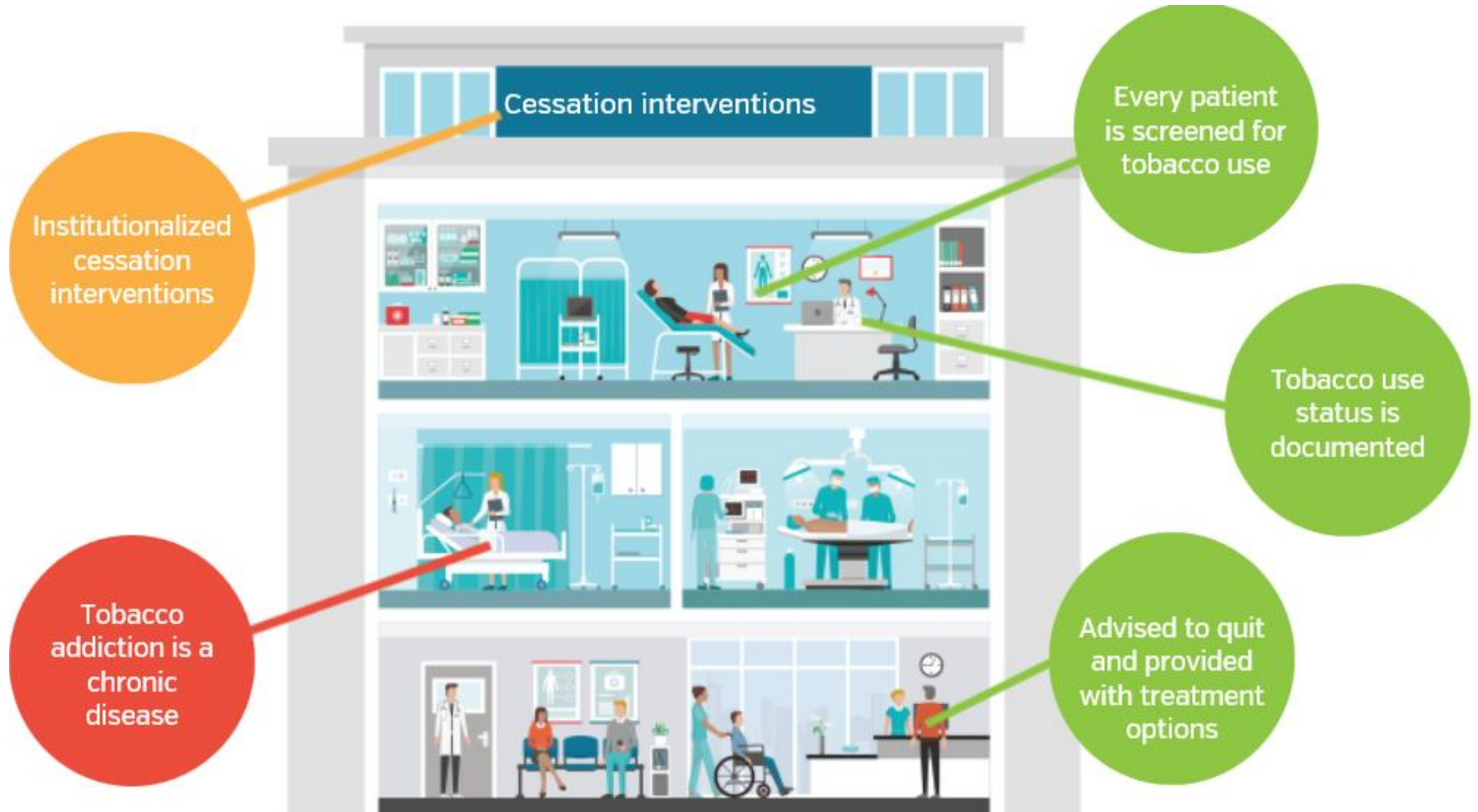
What is Health Systems Change

When thinking tobacco control:

1. *Every* patient is screened for tobacco use and tobacco use status is documented.
2. Patients who use tobacco are advised to quit and provided with options for evidence based treatments.



What does this look like?



5 Strategies to Systems Change

1

**Implement
Policy**

2

**Make
Cessation a
Priority**

3

Get Trained

4

**Ask, Advise,
Refer**

5

**Promote the
SD QuitLine**

product and report the violation to the patient's treatment team. If the use of tobacco products continues after the first verbal reminder, management and security may be contacted for additional assistance to reinforce the policy.

Visitors

Employees who encounter a visitor in violation of the tobacco-free policy are encouraged to politely explain the policy to the visitor and ask the person to quit using the tobacco product. Visitors who become agitated or unruly or repeatedly refuse to comply when informed of the tobacco-free campus policy may be reported to [name of appropriate department] situation as appropriate to maintain a safe environment.

Tobacco Cessation

[Organization name], the company department benefits/assistance) for cessation information 1-866-737-8487, or by

Tobacco cessation at tobacco-using patient of the patient/client

Visitors who wish to state for support by be posted within the employees and visitor

Traditional Tobacco

In respect for the tradition in the practice of culture policy. Use of traditional approved in advance

Questions

This policy will be mail questions regarding the department, including

This Tobacco-Free Policy



Clients or Patients (i)

1. Patients/client use of tobacco
2. At the time of regarding the secure location
3. All patients a tobacco use including nicotine remedies are and well-being the patient/c cessation process

Visitors

1. Visitors are prohibited tobacco will
2. Visitors who resources list

Outside Groups

Outside groups who this policy. Violation meet on this campus

Enforcement

Enforcement of this location) personnel, this policy with our visitors. If difficulties

Employees, Volunteer

Employees who violation termination. The use tobacco use and/o

Clients or Patients (i)

Employees who encouraged to politely

ID badges. If leaving the premise for meals or breaks, employees must follow this policy.

5. The odor of smoke on breath or clothing, the appearance of spit tobacco use (out pouching of lower lip/tobacco remnants in teeth) or thirdhand smoke is prohibited in all areas.
6. Employees who use tobacco are encouraged to use the tobacco cessation resources listed below.



Healthcare System Model Tobacco-Free Policy

Rationale

Smoking is the single most preventable cause of death, disease and disability in the United States. The U.S. Surgeon General confirms that exposure to secondhand smoke is a serious health hazard and there is no safe level of exposure. As a health care provider, [organization name] is committed to providing a healthy and safe environment for employees, patients, and visitors and to promote positive, healthy behaviors.

The policy set forth below is effective [date] for [organization name and location].

Tobacco-Free Environment

All [organization name] buildings and grounds are 100% tobacco-free at all times, without exception. The use of tobacco products (including, but not limited to, cigarettes, pipes, cigars, hookah, snuff, dissolvable tobacco or spit tobacco) or unregulated nicotine products (including electronic cigarettes) is not permitted by anyone on property owned or leased by [organization name]. This policy is applicable to all staff on the [organization name] campus whether they are employees of [organization name] or other agencies, patients, visitors, students, volunteers, vendors, lessees and contractors. The use of tobacco is prohibited on or in parking lots, [organization name] owned or leased vehicles, and any personal vehicles on the property.

Policy Communication

Signs stating the tobacco-free policy will be clearly posted on the perimeter of the property, at all entrances, and other prominent places. No ashtrays or other collection receptacles for tobacco trash will be placed on the property.

Employees, Volunteers, Physicians, Students and Contract Workers

1. [Organization name] employees and other employees who work on the [name] campus will be advised of the provisions of this policy during New Employee Orientation. The policy will be provided in writing to all employees.
2. [Organization name] will post this policy in employee common areas and in the [name] Employee Handbook.
3. Job announcements for all positions on the [organization name] campus will display a notice that [organization name] has a tobacco-free work environment policy.
4. Employees are prohibited from smoking or using other tobacco products during any part of their paid work shift, including breaks. The use of prohibited nicotine products is also not permitted while staff are in uniform or while displaying facility

Implement Policy



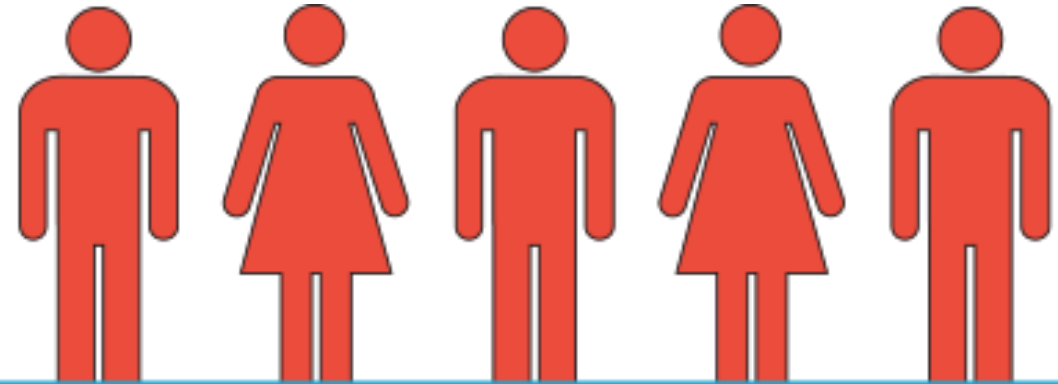
Is your healthcare facility the epitome of health?

Make Cessation a Priority

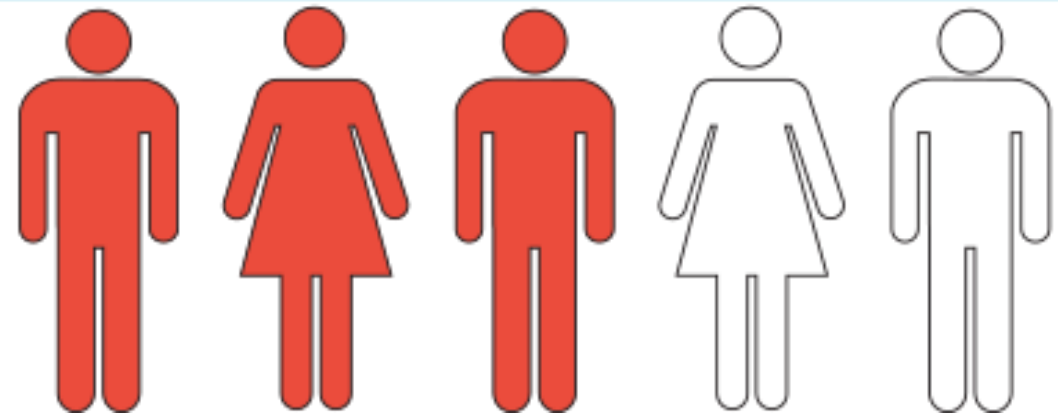
Making it a priority:

- Improves healthcare
- Overall health
- Reduces healthcare costs

Patients *want* and *expect* their healthcare provider to talk to them about quitting.



80% visit a healthcare provider every year.



Only 30% say they received counseling or medication options.

Healthcare Systems Strategies for Tobacco Cessation: *A Model Policy Guideline*



goodandhealthysd.org/healthcare

Provider Education

sdquitline.com (under provider tab)

- Resources
- In-Person Trainings
- System Strategies
- Medication Options
- Webinars
- Quarterly Newsletter
- Materials



PROF

+ SD QuitLine = More tobacco-free patients.

Learn how to make a QuitLine referral using PROF training

dohprof.sd.org

- Free, online training module
 - For Healthcare Providers
- Tobacco cessation, SD QuitLine, & referring patients

Patient Education

doh.sd.gov/catalog

FREE Education Materials:

- Discharge
- During stay
- Patient rooms
- Waiting rooms
- Elevators
- Anywhere!



Ask, Advise, Refer

Healthcare Providers have the skills to:

- Assess tobacco use
- Educate on adverse health effects of tobacco use
- Develop trust and rapport with patients
- Follow up



If you could deliver one piece of advice that could save your patient's life, would you?

Ask, Advise, Refer

A tobacco cessation intervention that could double a patient's chance at quitting.

ASK

- About tobacco use
- If willing to make a quit attempt in next 30 days.

Advise

- In a personable, nonjudgmental way
- Single best thing they can do for their health.

Refer

- If willing and ready, refer them to the SD QuitLine

Promote the SD QuitLine

South Dakota QuitLine

Your #1 Resource for Tobacco Users

1. **FREE Enrollment**
2. **FREE Medications**
3. **FREE Coaching**
4. **Successful & Evidence Based**

**Top QL in
the
Nation!**

SD QL Quit Rate: 41.3%

U.S QL Quit Rate: 30.2%



Who can use the SD QuitLine?

- SD Resident
- Tobacco user
- 13 years of age or older
- Ready to quit or has quit in the last 30 days



Referrals

Indirect Referrals

1-866-SD-QUITS

- Call the QL with the patient or give them a QL business card/brochure.

www.sdquitline.com

- Patient fills out form, QL calls them.

Kickstart Kit

- 2 weeks FREE NRT & Quit Guide



Referrals

Direct Referrals

- **Fax Referrals**
form available at
sdquitline.com
- **eReferrals- Electronic Health Record (EHR)**
*Best way to connect patient

Facilities with eReferral Capabilities:

- Sanford
- Avera
- Cheyenne River Health Center
- Rapid City Regional

Implementing:

- Coteau De Prairie
- Brown Clinic Watertown

sdquitline.com/providers

DIRECT REFERRALS

Connects the patient and the services directly so you can rest assured they are receiving guidance. Plus, it allows the QuitLine to inform the provider about the patient's progress.

Fax Referral Form

Electronic Health Record

- Simplest way
- Patient information sent directly to QuitLine for enrollment
- Available at several healthcare facilities
- See resources section of QuitLine **PROF** training for more information

PASSIVE REFERRALS

Helps a patient get connected, but leaves the provider unsure if patient follows through.

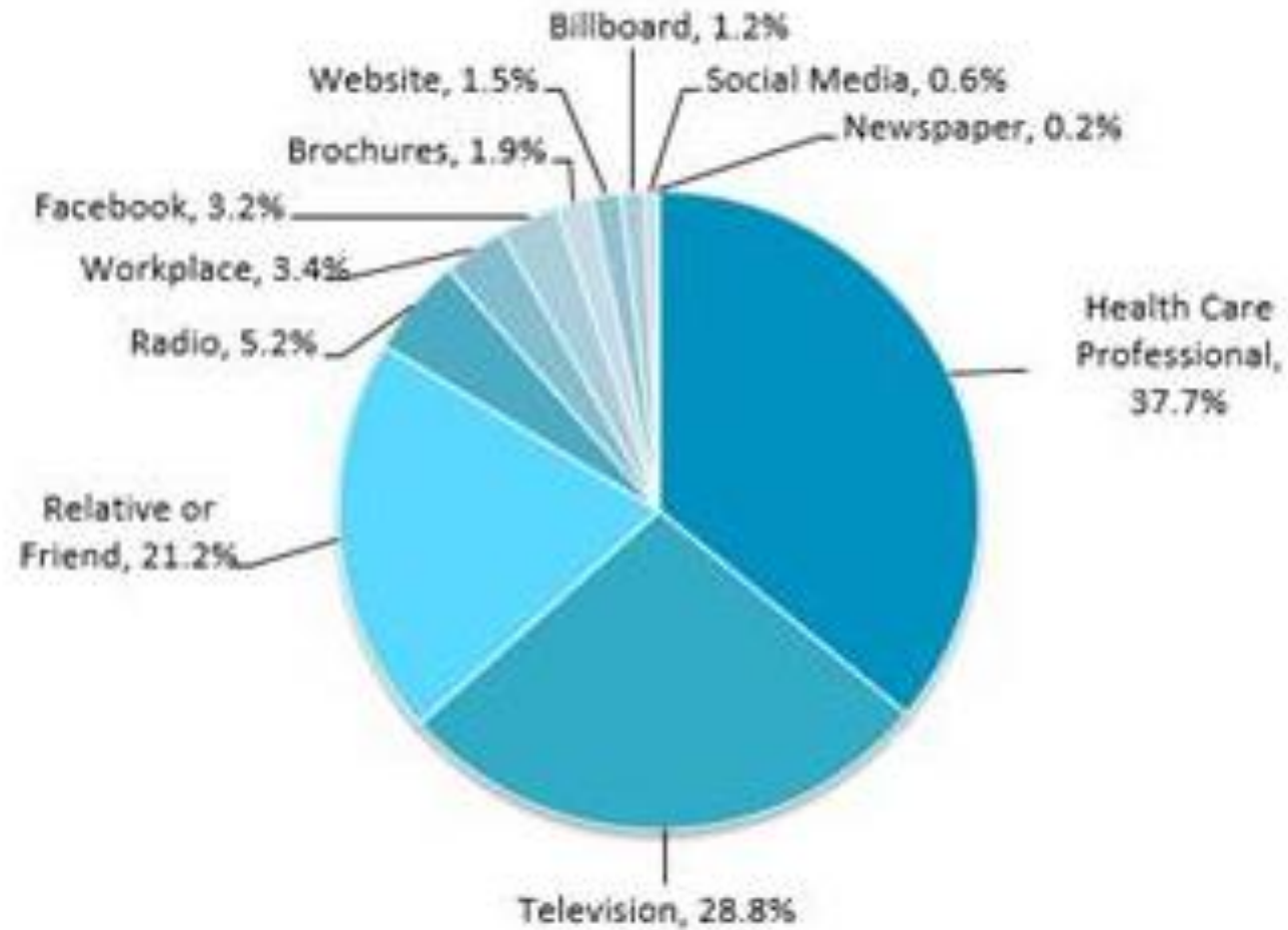
Phone: 1.866.SD-QUITS

- Call the QuitLine with your patient
- Give them a QuitLine business card or brochure. These are available to order through the DOH online catalog. Order online at doh.sd.gov/catalog

Web Referral: [SDQuitLine.com/enroll](https://sdquitline.com/enroll)

- Patient fills out form on their own
- QuitLine calls back by the next day to enroll them

How Callers Hear About QL Services



*Not equal to 100% as callers could cite more than one avenue.

Enrollment Call

- **Gather basic information**
 - **Assess readiness to quit in the next 30 days**
 - **Determine Eligibility**
 - **10-15 Min**
 - **Open 7am – 11 pm M-F & 8am-5 pm Sat.**
- Voicemail available 24 hrs**

Coaching

- **5 coaching sessions centered around a Quit Date**
- **Develop a quit plan, set a quit date, medications, coping, triggers, withdrawal etc.**
- **QuitLine Coach calls the participant at scheduled time**
- **QuitLine Coaches are highly trained in cessation and addiction.**

QuitLine Medications

***QL participants and their coach may choose one of the following for FREE**

- **8 weeks Zyban** (*physician RX required*)
 - Bupropion SR 150mg (Disp: 1 per day x3 days; BID thereafter)
- **OR**
- **8 weeks Nicotine Replacement Therapy (OTC):**
 - Patch:** 7 mg, 14 mg, 21 mg
 - Gum:** 2 mg, 4 mg
 - Lozenge:** 2 mg, 4 mg

Postpartum Program (P3)

*Did you know? **Half** of the women who quit smoking during pregnancy, relapse 6 months after delivery, **80% relapse** in 12 months.*

- Extension of standard QuitLine phone coaching
- 4 additional calls after baby is born
- Eligible for gift card incentives
- Able to immediately re-enroll in standard coaching if relapse has or does occur

Conclusion

Remember our goal:

Every patient is screened for tobacco use, advised to quit, and then offered treatment at *every* visit.

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***Changing the attitude of healthcare and healthcare systems,
enables us to better help our community members break free from
the strong hold of tobacco.***

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Coordinator

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